

# TIBBITS

## Young Audiences Audition Registration Form (PLEASE PRINT)

STUDENT NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ HEIGHT: \_\_\_\_\_

STUDENT EMAIL: \_\_\_\_\_ STUDENT CELL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

PARENT NAME(S): \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ PARENT CELL: \_\_\_\_\_

PARENT EMAIL: \_\_\_\_\_

PAST EXPERIENCE (plays, music, dance): \_\_\_\_\_

\_\_\_\_\_

CURRENT ACTIVITIES (clubs, sports, lessons, etc.): \_\_\_\_\_

\_\_\_\_\_

TO WHAT EXTENT THESE ACTIVITIES WILL INTERFERE WITH PLAY REHEARSALS  
(4:30pm to 6:00pm Mondays, Tuesdays, and Thursdays):

\_\_\_\_\_

\_\_\_\_\_

ANY OTHER INFORMATION YOU FEEL IS PERTINENT (such as allergies, especially to make up):

\_\_\_\_\_

### PERMISSION AND PUBLICITY USE

CHILD'S NAME \_\_\_\_\_

I hereby give my child permission to participate in the Tibbits production and further grant Tibbits permission to use my child's image in publicity for this production or for general marketing of the theatre and its programs.

PARENT'S/GUARDIAN'S NAME (printed) \_\_\_\_\_

PARENT'S/GUARDIAN'S

SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_